


FORM PTO-1390 (REV 10-94)		U.S. DEPARTMENT OF COMMERCE PATENT AND TRADEMARK OFFICE	ATTORNEY'S DOCKET NUMBER
TRANSMITTAL LETTER TO THE UNITED STATES DESIGNATED/ELECTED OFFICE (DO/EO/US) CONCERNING A FILING UNDER 35 U.S.C. 371			09663.0066USWO
			U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5) Unknown 10/563194
INTERNATIONAL APPLICATION NO. PCT/DK2004/000478	INTERNATIONAL FILING DATE July 2, 2004	PRIORITY DATE CLAIMED July 3, 2003	
TITLE OF INVENTION NOD-FACTOR PERCEPTION			
APPLICANT(S) FOR DO/EO/US JENSEN et al.			
Applicant herewith submits to the United States Designated/Elected Office (DO/EO/US) the following items and other information:			
<ol style="list-style-type: none"> <input checked="" type="checkbox"/> This is a FIRST submission of items concerning a filing under 35 U.S.C. 371. <input type="checkbox"/> This is a SECOND or SUBSEQUENT submission of items concerning a filing under 35 U.S.C. 371. <input checked="" type="checkbox"/> This express request to begin national examination procedures (35 U.S.C. 371(f)) at any time rather than delay examination until the expiration of the applicable time limit set in 35 U.S.C. 371(b) and PCT Articles 22 and 39(I). <input checked="" type="checkbox"/> A proper Demand for International Preliminary Examination was made by the 19th month from the earliest claimed priority date. <input checked="" type="checkbox"/> A copy of the International Application as filed (35 U.S.C. 371(c)(2)) <ol style="list-style-type: none"> <input type="checkbox"/> is transmitted herewith (required only if not transmitted by the International Bureau). <input checked="" type="checkbox"/> has been transmitted by the International Bureau. <input type="checkbox"/> is not required, as the application was filed in the United States Receiving Office (RO/US) <input checked="" type="checkbox"/> A translation of the International Application into English (35 U.S.C. 371(c)(2)). <input checked="" type="checkbox"/> Amendments to the claims of the International Application under PCT Article 19 (35 U.S.C. 371(c)(3)) <ol style="list-style-type: none"> <input type="checkbox"/> are transmitted herewith (required only if not transmitted by the International Bureau). <input checked="" type="checkbox"/> have been transmitted by the International Bureau. <input type="checkbox"/> have not been made; however, the time limit for making such amendments has NOT expired. <input type="checkbox"/> have not been made and will not be made. <input checked="" type="checkbox"/> A translation of the amendments to the claims under PCT Article 19 (35 U.S.C. 371(c)(3)). <input checked="" type="checkbox"/> An unsigned oath or declaration of the inventor(s) (35 U.S.C. 371 (c)(4)). <input type="checkbox"/> A translation of the annexes to the International Preliminary Examination Report under PCT Article 36 (35 U.S.C. 371(c)(5)). 			
Items 11. to 16. below concern document(s) or information included:			
11. <input type="checkbox"/> An Information Disclosure Statement under 37 CFR 1.97 and 1.98.			
12. <input type="checkbox"/> An assignment document for recording. A separate cover sheet in compliance with 37 CFR 3.28 and 3.31 is included.			
13. <input type="checkbox"/> A FIRST preliminary amendment.			
<input type="checkbox"/> A SECOND or SUBSEQUENT preliminary amendment.			
14. <input type="checkbox"/> A substitute specification.			
15. <input type="checkbox"/> A change of power of attorney and/or address letter.			
16. <input checked="" type="checkbox"/> Other items or information: Application Data Sheet (5 pages), International Publication Page, Form PCT/RO/101, Form PCT/ISA/210, Form PCT/IB/304, Form PCT/IB/308, Form PCT/IB/332, Form PCT/IPEA/416, Form PCT/IPEA/409			

U.S. APPLICATION NO. (If known, see 37 C.F.R. 1.5)		INTERNATIONAL APPLICATION NO.		ATTORNEY'S DOCKET NUMBER	
Unknown * 10/563194		PCT/DK2004/000478		09663.0066USWO	
BASIC NATIONAL FEE (37 CFR 1.492(a) (1)-(5)):					
[X] a) Basic National fee.....				\$300.00	\$300.00
[X] b) Examination fee.....				\$200.00	\$200.00
[X] c) Search fee.....				\$500.00	\$500.00
TOTAL OF ABOVE CALCULATIONS =				\$1000.00	
X Additional fee for specification and drawings filed in paper over 100 sheets (excluding sequence listing or computer program listing filed in an electronic medium). The fee is \$250 for each additional 50 sheets of paper or fraction thereof.					
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof (round up to a whole number)		Rate	
177	-100	77	/50 =	X \$250.00	\$500.00
Surcharge of \$130.00 for furnishing the oath or declaration later than [] 20 [] 30 months from the earliest claimed priority date (37 CFR 1.492(e)).				\$0	
CLAIMS	NUMBER FILED	NUMBER EXTRA	RATE		
Total claims	29	-20 = 9	X \$50.00 \$450.00		
Independent claims	5	-3 = 2	X \$200.00 \$400.00		
MULTIPLE DEPENDENT CLAIM(S) (if applicable)			+ \$360.00 \$0		
TOTAL OF ABOVE CALCULATIONS =				\$2350.00	
Reduction by 1/2 for filing by small entity, if applicable. Small entity status is claimed pursuant to 37 CFR 1.27				\$1175.00	
SUBTOTAL =				\$1175.00	
Processing fee of \$130.00 for furnishing the English translation later than [] 20 [] 30 months from the earliest claimed priority date (37 CFR 1.492(f)).				+ \$0	
TOTAL NATIONAL FEE =				\$1175.00	
Fee for recording the enclosed assignment (37 CFR 1.21(h)). The assignment must be accompanied by an appropriate cover sheet (37 CFR 3.28, 3.31). \$40.00 per property				+ \$0	
TOTAL FEES ENCLOSED =				\$1175.00	
				Amount to be: refunded	\$0
				charged	\$0
a. [] Check(s) in the amount of \$ to cover the above fees is enclosed.					
b. [X] Please charge my Deposit Account No. <u>13-2725</u> in the amount of \$1175.00 to cover the above fees. A duplicate copy of this sheet is enclosed.					
c. [X] The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment to Deposit Account No. <u>13-2725</u> .					
NOTE: Where an appropriate time limit under 37 CFR 1.494 or 1.495 has not been met, a petition to revive (37 CFR 1.137(a) or (b)) must be filed and granted to restore the application to pending status.					
SEND ALL CORRESPONDENCE TO: Denise M. Kettelberger MERCHANT & GOULD P.O. Box 2903 Minneapolis, MN 55402-0903					
SIGNATURE: 					
NAME: Denise M. Kettelberger					
REGISTRATION NUMBER: 33,924					

10/563194

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

IAP6 Rec'd PCT/PTO 03 JAN 2006

Applicant: JENSEN et al.
 Docket: 09663.0066USWO
 Title: NOD-FACTOR PERCEPTION

CERTIFICATE UNDER 37 CFR 1.10:

"Express Mail" mailing label number: EV 638433736 US
 Date of Deposit: January 3, 2006

I hereby certify that this paper or fee is being deposited with the U.S. Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 on the date indicated above and is addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

By: 
 Name: John Jurs

Commissioner for Patents
 P.O. Box 1450
 Alexandria, Virginia 22313-1450

Sir:

We are transmitting herewith the attached:


- ☒ Transmittal sheet, in duplicate, containing Certificate under 37 CFR 1.10.
- ☒ National Stage PCT Patent Application: Spec. 74 pgs; 29 claims; Abstract 1 pgs.
The fee has been calculated as shown below in the 'Claims as Filed' table.
- ☒ 13 sheets of formal drawings
- ☒ Small entity status is claimed pursuant to 37 CFR 1.27
- ☒ An unsigned Combined Declaration and Power of Attorney
- ☒ Please charge Deposit Account No. 13-2725 in the amount of \$1175.00 to cover the Filing Fee
- ☒ Application Data Sheet, 5 pages.
- ☒ Computer readable form of the Sequence Listing. Applicants state that the paper copy form of the Sequence Listing section of the present application, and the computer readable form submitted herewith, are the same.
- ☒ Other: Form PTO-1390, International Publication Page, Form PCT/RO/101, Form PCT/ISA/210, Form PCT/IB/304, Form PCT/IB/308, Form PCT/IB/332, Form PCT/IPEA/416, Form PCT/IPEA/409
- ☒ Return postcard

CLAIMS AS FILED

Number of Claims Filed	No.	In Excess of		Extra		Rate		Fee
Total Claims	29	20		9		25.00	=	225.00
Independent Claims	5	3		2		100.00	=	200.00
Multiple Dependent Claims Fee							=	0.00
Basic Filing Fee							=	150.00
Search Fee							=	250.00
Examination Fee							=	100.00
Utility Application Size Fee	177	100		77		125.00	=	250.00
Total							=	1175.00

Please charge any additional fees or credit overpayment to Deposit Account No. 13-2725. A duplicate of this sheet is enclosed.

Merchant & Gould P.C.
 P.O. Box 2903 Minneapolis, MN 55402-0903
 612.332.5300

By: 
 Name: Denise M. Kettelberger
 Reg. No.: 33,924
 Initials: DMK/sbd

23552

PATENT TRADEMARK OFFICE

PTO TRANSMITTAL - NEW FILING)